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State of Wisconsin
Department of Natural Resources
Private Water Systems Section - DG/2
dnr.wi.gov

DEC 2 0 2013

High Capacity, School or Wastewater Treatment Plant Well Approval Application

Form 3300-256 (R 7/05)

age 1 of 6

Notice: Prior department approval is required for the poinstruction, reconstruction or operation of a high capacity well or system of high capacity wells, a school well or a wastewater treatment about well in accordance with Section NR 812.09(4)(a), Wisconsin Administrative Code. Personally identifiable information collected on this form, including such data as your name, address and phone number, will be used for management of department programs and is unlikely to be used for other purposes. This information will be addressable under Wisconsin's Open Records Laws, ss. 19.32 - 19.39, Wis. Stats.

Use this form to request an approval for installation of a well or wells on a high capacity property, seek approval to make other changes to a high capacity property or to modify a well on a high capacity property, as required by NR 812.09(4)(a), Wisconsin Administrative Code. Refer to definitions of high capacity well, high capacity property and high capacity well system on page 5.

This form is not intended to be used when seeking approval for construction or modification of wells serving water systems regulated under ch. NR 811, Wis. Adm. Code. Any water system serving 7 or more homes, 10 or more mobile homes, 10 or more apartments, 10 or more condominiums, or 10 or more duplexes is regulated under ch. NR 811, Wis. Adm. Code. See NR 811,01, Wis. Adm. Code for applicability requirements.

			5 800 10		
Applicant Information					
Application Prepared By (Name and Title)	\	Company	_		
John Pelke (We	11 Driller	Pelke	2 Plumbing 2	(D)	ell William
Street Address		City	- Training	State	ZIP Code
N6298 State	Hwy 25	Da	and	CUT	54736
Telephone Number	Fax Number	I Oal	E-Mail Address		
715 672-5266	7/5 672 -5	267	John @ Pelle	· D	lumbia can
Property Ownership Information	779 00 30	10/	001111 (60) 1 0010		cimeling a covi
Property owner, if different than applicant (Name of Person and Title)	Company			
David Knoop	ko	Mo	re = to = do=	Eur.	106
Street Address	4	City	£ 10 00	State	ZIP Code
W3619 Forster	· ~l	D.	0	1017	54736
Telephone Number	Fax Number	1 Vai	E-Mail Address	Mu	134736
715 279-0252			Contract State Co		
Well Operator Information			L		
Well operator if different than owner (Name	e of Person and Title)	Company			
Comment of the Commen					
Street Address		City		State	ZIP Code
		.,,		Otato	Zii Oodo
Telephone Number	Fax Number	1	E-Mail Address		
,			a man / tadi oo		
Property Information					
Enter the High Capacity Well File Number be	elow if the property is already:	a high canacity	v property. If the property is no	nt design	ated as a high canacity
property at the time of application, enter "NC	NE." NOTE: Find the file num	ber in upper ri	oht hand corner of the most re	ecent blo	h capacity well approval
or use the compact disk of departmental wel "Location" section. File number format is as	I data that is issued to drillers a follows: (1 or 2 digits for county	and pump insta () - (1 digit for	allers. On the compact disk, s	ee "File l	ocation" in red print in
County	Town	// (1 digit for	High Capacity V	The second second	
Pagia	Lima		//		
Submittal Purpose	Cina		1/ON	e	
Check all that apply:					
Install one or more new wells with	a canacity greater than 70 c	allone per m	ninuto		
Install one or more new wells with		2) (1)		odu	
Replace one or more wells with a c				erty.	
parting.	\$550 L				
Replace one or more wells with a c				ty.	
Reconstruct one or more wells with					
Reconstruct one or more wells with				perty.	
Increase pumping rate in one or me			The contract of the contract o		
Request continued operation of hig		inge in owne	rship. (No application fee	required	i.)
Renew a previous approval that ha					
Well (or wells) will serve a school of	or wastewater treatment pla	nt. See defii	nitions on page 5.		
Other, explain					

Site 8	Statu	s Information
and t	ne inf	the site status using the internet or the compact disk of departmental well data that is issued to drillers and pump installers ormation supplied by the property owner. Internet address is dnr.wi.gov/org/water/dwg/dws.htm . Enter YES or NO for each wing questions.
YES	NO NO	Has the property boundary changed since the most recent high capacity well approval was issued? If the property is not yet a high capacity property, check NO.
	Ø	Has there been a change in well ownership since the last approval was written? If YES, name of current owner: Date of purchase:
	Ø	Has there been a change in well operator since the last approval was written? If YES, name of current operator: Date of change:
	Ø	Will a proposed well be connected to a plumbing system that is supplied by other sources (other wells, municipal supply, etc.)? If YES, include a schematic drawing showing backflow protection.
	奴	is a proposed well within 1,200 feet of a landfill? Determine if there are any landfills nearby, using the well information compact disk FIND feature. Enter the township, range and section of the well location. If the well is near a section line, also check the adjacent section or sections. If YES, list the landfill site ID Number: OR Landfill location: (Township/Range/Section)
	如	Is a proposed well on a property that has a contaminated site? If YES, list the BRRTS (Bureau for Remediation and Redevelopment Tracking System) Number here and specify if the site is open or closed:
	Ŕ	Is a proposed well on a property that has a groundwater use restriction recorded on the deed? If YES, list the BRRTS number, as assigned to the contaminated site by the DNR remediation and redevelopment program:
	内	Is a proposed well on a property that is listed on the department's registry of closed remediation sites for a groundwater use restriction? See compact disk or internet at maps.dnr.state.wi.us/imf/dnrimf.jsp?site=brrts . If YES, list the BRRTS Number here:
	囟	Is a proposed well to be used for a public water supply system that serves 25 or more people? See definition of a "public water system" in the definitions section on page 5.
	囟	Is a proposed well to be installed within a special casing area? Refer to the list of special casing areas that is published by the department and/or contact the regional DNR office.
	Ø	Has the number of wells or pumping capacity in an existing well increased since the most recent high capacity well approval was issued?
	M	Has the number of wells decreased since the most recent high capacity well approval? If the property is not yet a high capacity property, check NO.
	Q	Is a non-pressurized storage vessel (i.e. reservoir) other than a pond proposed or in use?
	X	Will the well discharge directly to a storage pond?
	囟	Is a pressurized tank with a capacity greater than 1,000 gallons proposed or in use?
	Ø	Is a proposed well within 1,200 feet of a quarry?
	(X)	Is a proposed well located in a floodplain or floodway?
	(X)	Are any existing well installations on the high capacity property out of compliance with Chapter NR 812, Wisconsin Administrative Code?
	囟	Will the well be used as a source of bottled water?
	(X)	Are you seeking a variance to construct a well that has a capacity of less than 70 gallons per minute to low capacity well construction standards?
	凶	Is the property served by a community water system?

Existing Well Information																
Enter the following information on a	all exi	sting v	vells (on the p	orope	erty, if mo	re than	four v	weils,	submit	additlo	nal st	neets:			
Well Name Assigned by Well Owner (North Well, etc.):	N	/ W.	2													
Well Number Assigned by Owner (001, 002, etc.):																
WI Unique Well Number or NA if no number:																
Permanent DNR High Capacity Well Number or N/A If none:																
Public Water System ID Number, if Public (if not public, NONE):																
Potable or Non-Potable Use:																
Type of Well (irrigation, Industrial, Residential, etc.):																
Requested Average Water Usage per Day in Gallons:																
Requested Maximum Water Usage per Day in Gallons:																
Seasonal? (April to October, Year Around, etc.):																
Approved Pumping Capacity If Previously Approved (gpm):																
Current Pump Type & Capacity (gpm):												1				
Proposed Pump Type & Capacity If Change Requested (gpm):																
Pump Discharge Type (Over Top of Casing Seal, Pitless, etc.):																
Discharge Location (Building Pressure Tank, Pond, etc.):																
Height of Well Casing Above Ground in Inches:																
Potential Contaminant Sources and Distance:																
Well Loc: Quarter Quarter Section		1/4	of	1/4	1	1/4	of	1/4		1/4 0	of	1/4		1/4 0	of	1/4
or Government Lot Number														··		
Section or French Long Lot No.																
Township:	т			N	T			N	T			N	Т	·		N
Range (Select E or W):	R			le □v	V R		ΠE	□w	R		E	\square w	R		ΠE	□w
Latitude (Degrees and Minutes)		0	<u> </u>		<u> </u>	٥				٥	<u></u>		<u></u>	•		<u> </u>
Longitude (Degrees and Minutes)		•			<u> </u>				<u></u>	<u> </u>		'	<u></u>	<u> </u>	<u> </u>	·
GPS Map Datum (WGS84, WTM91, etc.)																
include as much of the following inform well construction record is attached, a	nation pplica	as prac nt may l	tical f eave	or wells the follo	that o	do not have rows blank	e well c	onstruc	tion re	cords at	tached	to the	applica	tion, ho	wever i	f the
Date of Construction:						~										
Orllled by (Name of Orilling Firm):																
Drilling Method(s) (Rotary, Percussion, Etc.)		· · · · · · · · · · · · · · · · · · ·														
Well Depth In Feet:																
Upper Enlarged Drillhole Diameter in Inches and Depth in Feet:		inches	,	fee	t	inches,		feel		inches,		feet		inches,		feet
Lower Drillhole Diameter in Inches and Depth in Feet:		inches		fee		inches,		feet		Inches,		feet		inches,		feet
Well Casing Diameter in Inches and Depth in Feet:		inches		fee		inches,		feet		inches,		feet		Inches,		feet
Well Casing Material and Wall Thickness:																
Annular Space Material Between Casing and Drillhole Wall;																
Is There a Well Screen (Y or N) If so, Screen Material?:																

Proposed Well Information					
Enter the following information on a	Il proposed wells on the property, if more than two we	ellatt			
(North Well, etc.):	irrigation weel #2	alls or alternate c	onstruction, submit	additional sh	eets:
Well Number Assigned by Owner (001, 002, etc.):	5			**** <u></u>	"
Well Loc: Quarter Quarter Section or French Long Lot Number	5 W 1/4 of N W 1/4 of Section //		NIII.		
or Government Lot Number	70 III OI GECTION	1/4	f of 1/4 c	of Section	
Township & Range (Select E or W	0 T 25 N.R 12 DE 12V				
Latitude (Degrees and Minutes)	N44 · 39' 41.96"	V 1	N, R	E	_ <u></u>
Longitude (Degrees and Minutes)	WO91 · 48' 25.04"		0	<u>-'</u>	
GPS Map Datum (WGS84, WTM91, etc.)	Determe		<u> </u>		
Type of Well (Irrigation, Industrial, Residential, etc.):	Type: irriaction Potable Non-Potable	_		Potabl	
Drilling Method(s) (Rotary, Percussion, Etc.);	N North Otdole	Type:		Non-P	otable
Anticipated Geological Materials and	Depths that Are Expected During Brilling:				
Material and Depth Interval:					
Material and Depth Interval:		<u> </u>	from	0 ' to	
Material and Depth Interval:	7 / 020	<u>'</u>	from	' to	
Material and Depth Interval:		<u> </u>	from	' to	
Material and Depth Interval:	from ' to	1	from	' to	_
Drillhole Diameter and Anticipated De	t from ' to	1	from	¹ to	
Diameter and Depth Interval:	2011	1			~
Diameter and Depth Interval:	1611	1	from	' to	
Diameter and Depth Interval:	75 from 60 to 440	•	from	' to	:
Permanent Casing or Liner Diameter a	I from ' to and Wall Thickness at Anticipated Depth Intervals:	1	from	' to	
Diameter and Wall Thickness at Depth Interval:	16			····	
Diameter and Wall Thickness	5 mick 0 10 60	" diam/	" thick	0 ' to	
at Depth Interval: Permanent Casing or Liner Material, i	"diam/ "thick to	" dlam/	" thick	' to	,
Casing Joints (Welded, T and C,	Oseo:			10	
etc.) Material and Weight	welded				
at Depth Interval:	Steel MJ.05 lbs/foot 0. to 60.				
Material and Weight at Depth Interval:	0.000		/ ibs/foot	0 ' to	
Screen Material, Slot Size in Inches	/ ibs/foot ' to '		/ lbs/foot	' to	,
and Depth Interval or N/A if none:	/ "/ 'to		, ,		
Casing to Screen Joint (Welded, T and C, K Packer, etc.)				<u>' to</u>	
Annular Space Material Including Filter	Pack Material, If Used:	<u> </u>			
Material and Depth Interval:	real cement 1 0' 10 60'		· · · · · · · · · · · · · · · · · · ·		
Material and Depth Interval:	/ ' to '			0' to	
Proposed Average Water Usage Per Day in Galions:	360,000 and			' to	
Proposed Maximum Water Usage Per Day in Gallons:	720 000 001				
Seasonal? (April to October, Year Around, etc.):	seasonal spa				
Proposed Pump Type & Capacity (gpm):	Submersible SODERM				
Discharge Type (Over Top of Casing Seal, Pitless Adapter or Unit):	+.5 C				
Discharge Location (Building Pressure Tank, Pond, etc.):	Top of casing	· · · · · · · · · · · · · · · · · · ·		*************************************	
Distance and Direction to Nearest Public Utility Well & Well Name:		··			
Distance to Other Potential Contaminant Sources:					
Distance to Other Potential	none				
Contaminant Sources:					
eave Blank, for Department use only					

Required Attachments

- Attach one of the maps described in A. or B., below. Plot the existing and proposed well locations on the map. For wells that have a Wisconsin Unique Well Number or a Permanent High Capacity Well Number, plot the well locations with one of those numbers.
 - A. Copy of a plat map with the property boundary clearly shown. If the property is contiguous with properties owned by the same owner in another township, include a copy of that township map too, showing the property boundaries. If the property owner listed on the plat map is different from the current owner, list the date or dates, that the current property owner purchased the property on the map.
 - B. Map of the property prepared by a licensed land surveyor and the property description as described by the surveyor.
- 2. Sketch map showing all of the following that are planned or exist within 300 feet of each proposed well: proposed well location; other wells; property boundary; wetlands; potential contaminant sources (septic tank and drainfield, petroleum storage tanks, sewer lines, etc.); buildings and north arrow. If no pertinent features to map within 300 feet of the proposed well, for example an irrigation well in the middle of a field, state that on the property map listed above and plot the well locations on that map.
- 3. Any well construction records available for existing wells on the property. Do not attach any well construction records for wells that are not on the property. If a Wisconsin Unique Well Number has not been assigned, write a well name or site well number on the record that correlates to the well name or number plotted on the maps.
- 4. For proposed wells with a capacity greater than 400 gallons per minute, include the performance curve or performance table that is provided by the pump manufacturer. If the pump will be a lineshaft turbine, provide a curve with the same rpm as the motor under full load and list the motor horsepower.
- 5. If more than one well is connected to a common plumbing system, also provide a schematic drawing of the system showing method of preventing backflow. This sketch must include the well discharge (pitless, over top of casing sanitary seal); the water line from the well; pressure tanks; sampling faucets; check valves; backflow preventers; air gaps; manually operated valves; water meters; pressure switches for pumps; and any other pertinent fittings. This schematic drawing must also identify which of these components are buried or above ground. If there is more than one check valve within the well casing, include in-well check valves on the schematic.
- 6. If reconstruction of an existing well is proposed, include a diagram of the current well construction and a diagram of the proposed construction.
- 7. If the application is for a high capacity well or wells, a \$500.00 check payable to the Department of Natural Resources, unless the application is only for continued operation after a change of ownership.

Certification and Applicant Signatures

If the application requests a variance for a well within 1,200 feet of a landfill, a well on a property with a groundwater use restriction, or any other variance to NR 812, Wis. Adm. Code, the property owner must sign the application. If the well operator will install a well on property that he or she does not own, the property owner must also sign the application. Otherwise, an agent of the owner may sign the application.

Unsigned and incomplete applications will not be approved.

By signing this form, the person signing this application certifies that to the best of his or her knowledge, all existing well installations on the property comply with ch. NR 812, Wis. Adm. Code. The person also certifies that to the best of his or her knowledge, all information in the application is accurate and correct.

Name - Print	Check Box
_ John Pelke	Owner Agent of the Owner
Signature John Pellie	Company Pellee Plumbing & Well Dilling 12-16-13
Application submittal. Mail completed application - DG/2, PO Box 7921, Madison WI 5	ation and payment with all required attachments to DNR Private Mater Systems
Definitions from Wisconsin Administrative	Codes
"High capacity well" means a well constructed	d on a high capacity property. (NR 812 07/51))

"High capacity property" means one property on which a high capacity well system exists or is to be constructed. [NR 812.07(52)]

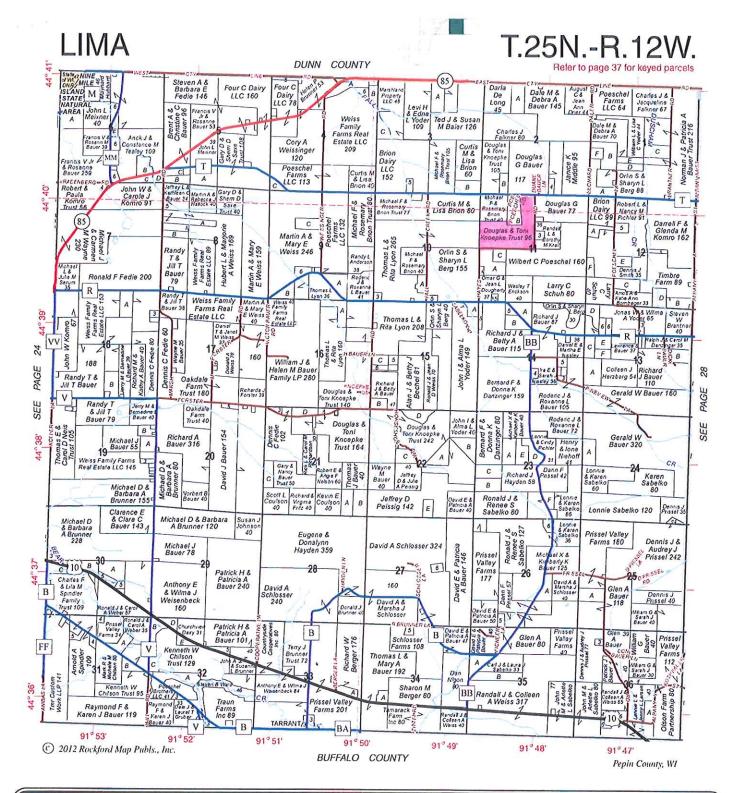
"High capacity well system" means one or more wells, drillholes or mine shafts used or to be used to withdraw water for any purpose on one property, if the total pumping or flowing capacity of all wells, drillholes or mine shafts on one property is 70 or more gallons per minute based on the pump curve at the lowest system pressure setting, or based on the flow rate. [NR 812.07(53)]

"Public water system" means a system for the provision to the public of piped water for human consumptions if such system has at least 15 service connections or regularly serves an average of at least 25 individuals daily at least 60 days per year. A public water system is either a community water system or a non-community water system. Such system includes: (a) Any collection, treatment, storage, and distribution facilities under control of the operator of such system and used primarily in connection with such system, and (b) Any collection or pretreatment storage facilities not under such control which are used primarily in connection with such system. [NR

"School" means a public or private educational facility in which a program of educational instruction is provided to children in any grade or grades from kindergarten through the 12th grade. Water systems serving athletic fields, school forests, environmental centers, home-based schools, day-care centers and Sunday schools are not school water systems. [NR 812.07(94)]

"Wastewater treatment plant" means any facility provided for the treatment of sanitary or industrial wastewater or both. The following types of facilities are excluded: (a) Facilities defined as private sewage systems in s. 145.01(12), Stats. (b) Pretreatment facilities from which effluent is directed to a public sewer system for treatment. (c) Industrial wastewater treatment facilities which consist solely of a land disposal system. [NR 114.03(14)]

ted on a high capacity property, [NR 812.07(51)]





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